

CLAIMS ONLY

Application Number

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		
	Indep	Depend	Indep	Depend	Indep	Depend
1						
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49						
50						
Total						
Indep	4		2			
Total						
Depend	9		13			
Total						
Claims	13		15			

May be used for additional claims or amendments						
	Indep	Depend	Indep	Depend	Indep	Depend
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